SECTION 12 Location to Location Transfer: (Bars and Liquor Stores ONLY)

APPLICANTS CANNOT OPERATE UNDER A LOCATION TRANSFER UNTIL IT IS APPROVED BY THE STATE

	ame			
(Exactly as it appears on license) Add	ress			
(Physical Street Location)				
3. License Type: l	icense Number:	A DESCRIPTION OF THE PROPERTY		
4. If more than one license to be trans	sferred: License Type:	License N	umber:	
5. What date do you plan to move? _		What date do you plan	to open?	
	n-state applicants <u>exclud</u> es (series 5, 11, and 12):	ing those applying for gove	ernment, hotel/motel,	<u>and</u>
A.R.S. § 4-207 (A) and (B) state that no retailer the director, within three hundred (300) horizont kindergarten programs or grades one (1) throug	al feet of a church, within three hu	ndred (300) horizontal feet of a put	olic or private school building	g with
The above paragraph DOES NOT apply to:	,			en EU
a) Restaurant license (§ 4-205.02)	1	c) Government license (§ 4-205.03)	Ŧ
b) Hotel/motel license (§ 4-205.01)	•	d) Fenced playing area of a golf cou	urse (§ 4-207 (B)(5))	run Turn
				1
Distance to nearest school:	0.2 MI ft. Name of scho	San Francisco de Asis Catho	olic School	
	- Transaction	mphrey St Flagstaff AZ 86001		
	, 1001000	City, State,	Zip	<u> </u>
2. Distance to nearest church:0	.1 Mi ft. Name of churc	h Nativity of the Blessed Virgin	n Mary Chapel	garante Garante Garante
		eryl Ave Flagstaff AZ 86001		
		City, State, Z		
3. I am the: ☑ Lessee ☐ So	ıblessee 🗌 Owner 🔲	Purchaser (of premises)		
4. If the premises is leased give lessor	s: Name Barry and Arlette Le	vitan		
	Address 19 S San Francisco	St Flagstaff AZ 86001		
4. 14	55.24 What is the rema	City, State, Zip		
		nining length of the lease 5	yrsmos.	
4b. What is the penalty if the lease is	not fulfilled? \$	or other still owe term (give details - attach	additional sheet if necess	_ sary)
5. What is the total <u>business</u> indebtedne Please list lenders you owe money t		cluding the lease? \$_0		
Last First	Middle Amount Owed	Mailing Address	City State Zip	
			*	
			 	
	(ATTACH ADDITIONAL SH	EET IF NECESSARY)	MUMBELLIA NO. 1 14 A A A A A A A A A A A A A A A A A	
6. What type of business will this licen:	se be used for (be specific)?	bar		

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SECTION 13 - continued

7.	Has a license or a transfer license for the premises on this application been denied by the state within the past one (1) year? ☐ YES ☑ NO If yes, attach explanation.					
8	Does any spirituous liquor manufacturer, wholesaler, or employee have any interest in your business? YES NO NO					
	Is the premises currently licensed with a liquor license? ☑ YES ☐ NO If yes, give license number and licensee's name:					
Li	cense #_06030008 (exactly as it appears on license) Name Randy D. Nations					
-						
2	ECTION 14 Restaurant or hotel/motel license applicants:					
1	 Is there an existing restaurant or hotel/motel liquor license at the proposed location? ☐ YES ☐ NO If yes, give the name of licensee, Agent or a company name: 					
	and license #:					
2	Last First Middle If the answer to Question 1 is YES, you may qualify for an Interim Permit to operate while your application is pending; consult A.R.S. § 4-203.01; and complete SECTION 5 of this application.					
3	. All restaurant and hotel/motel applicants must complete a Restaurant Operation Plan (Form LIC0114) provided by the Department of Liquor Licenses and Control.					
4	As stated in A.R.S. § 4-205.02.G.2, a restaurant is an establishment which derives at least 40 percent of its gross revenue from the sale of food. Gross revenue is the revenue derived from all sales of food and spirituous liquor on the licensed premises. By applying for this \Box hotel/motel \Box restaurant license, I certify that I understand that I must maintain a minimum of 40 percent food sales based on these definitions and have included the Restaurant Hotel/Motel Records. Required for Audit (form LIC 1013) with this application.					
	applicant's signature					
	Control to schedule an inspection when all tables and chairs are on site, kitchen equipment, and, if applicable, patio-barriers are in place on the licensed premises. With the exception of the patio barriers, these items are not required to be properly installed for this inspection. Failure to schedule an inspection will delay issuance of the license. If you are not ready for your inspection 90 days after filing your application, please request an extension in writing, specify why the extension is necessary, and the new inspection date you are requesting. To schedule your site inspection visit www.azliquor.gov and click on the "Information" tab.					
-	applicants initials					
	ECTION 15 Diagram of Premises: (Blueprints not accepted, diagram must be on this form)					
1.	Check ALL boxes that apply to your business:					
	☑ Entrances/Exits ☑ Liquor storage areas Patio: ☑ Contiguous ☐ Non Contiguous					
2	Is your licensed premises currently closed due to construction, renovation, or redesign? YES NO					
۷.	If yes, what is your estimated opening date?					
2	month/day/year Restaurants and hotel/motel applicants are required to draw a detailed floor plan of the kitchen and dining areas including					
3 .	the locations of all kitchen equipment and dining furniture. Diagram paper is provided on page 7.					
4.	The diagram (a detailed floor plan) you provide is required to disclose only the area(s) where spiritous liquor is to be sold, served, consumed, dispensed, possessed, or stored on the premises unless it is a restaurant (see #3 above).					
5.	Provide the square footage or outside dimensions of the licensed premises. Please do not include non-licensed premises, such as parking lots, living quarters, etc.					
	As stated in A.R.S. § 4-207.01(B), I understand it is my responsibility to notify the Department of Liquor Licenses and Control when there are changes to boundaries, entrances, exits, added or deleted doors, windows or service windows, or increase or decrease to the square footage after submitting this initial drawing.					

applicants initials